



State of South Dakota
Campaign Finance Disclosure Statement

Full Name of Committee: South Dakota Campaign for Healthy Families Ballot Question Committee

Casey Murschel

Committee Chair, Treasurer, Candidate

cmurschel@sio.midco.net

E-Mail

4320 S. Louise Ave Ste. 201 Sioux Falls, SD 57106

Committee Street Address

P.O. Box 1484 Sioux Falls SD 57101

Committee Postal Address

Casey Murschel

Name of Person Making Report

605.368.1708

Daytime Telephone #

Evening Telephone #

If Candidate Committee, please note office being sought, and District # (if applicable)

Political party affiliation (if any)

If Ballot Question Committee, Ballot Question number or letter.

Supporting? ☐

Opposing? ☐

Type of Campaign Statement:



Pre-Primary



Pre-Convention



Pre-General



Mid-Year



Year-End



Amendment



Supplement



Termination

VERIFICATION OF PERSON MAKING REPORT

I, Casey Murschel
(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty per day for each day that the statement remains delinquent.

10/24/14

Date

Casey Murschel

Signature of Treasurer

County, municipal and school candidates file this statement with the person in charge of the local election.

Statewide PACs, political party, ballot question and other committees file this statement with the Secretary of State's Office.

Secretary of State, Elections Department
500 East Capitol Ave., Ste 204
Pierre, SD 57501
or fax to 605-773-6580 or
e-mail to cash@state.sd.us

Fax and e-mail images must contain the signature(s) and the **original must be filed in our office within one week** following the date the fax/e-mail was received.

INCOME

Direct Contributions from Individuals

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributions from Individuals	Amount
Enter total of all <i>unitemized</i> contributions (\$100 or less each from individuals) here:	\$ _____

Line item A1

Itemized Contributions from Individuals

Enter all *itemized* contributions (\$100 or more each from individuals) below:

[illegible]

Line item A2

[illegible]

Itemized Contributions from Organizations

[illegible]

Name	Residential (Street) Address	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Political Parties here:		\$.

Direct Contributions from In-State Political Action Committees

[illegible]

Line item D1

Contributions from Federal Political Action Committees

Name	Filing Web Address	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Federal Political Action Committees or Out-of-State Candidate Committees here:		\$.

Line item D2

Direct Contributions from Candidate Committees**Contributions from Candidate Committees**

Name	Residential (Street) Address	Amount
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all contributions from Candidate Committees here:		\$.

Line item E1

In-Kind Contributions

Non-cash contributions of good and services and the estimated fair market value

Description	Name and residential address	Estimated value
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
		\$.
Enter total of all estimated in-kind contributions here:		\$ <u> </u> .

Line item F1

Other Income

Refunds, rebates, interest earned, sale of property, or other income which is not a direct contribution.

Source of Income	Description of Income	Amount
		\$.
		\$.
		\$.
Enter total of other income here:		\$ <u> </u> .

Line item G1

Establishing and Administering Committee/Solicitation Costs

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds	Amount
	\$.
	\$.
	\$.
Enter total here:	\$ <u> </u> .

Line item H1

EXPENDITURES

Operational Expenditures

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Campaign Expenses	Amount
Advertising	\$.
Consulting	\$.
Interest	\$.
Postage	\$.
Printing	\$.
Rent	\$.
Salaries	\$.
Telephone	\$.
Travel	\$.
Utilities	\$.
List other expense items below:	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
Enter total expenditures here:	\$ _____.

Line item X1

Contributions Made to Candidates and Committees

<i>Name of Candidate or Committee</i>	<i>Amount</i>
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
	\$.
Enter total of contributions to candidates or committees here:	\$ <u> </u> .

Line item X2

Debts and Obligations Owed by Committee

All committee obligations which are incurred but unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

<i>Owed to/Creditor's Name</i>	<i>Nature of obligation</i>	<i>Address</i>	<i>Amount</i>
			\$.
			\$.
			\$.
			\$.
Enter total debt owed by committee here:			\$ <u> </u> .

Line item X3

Loans Owed to Committee

Report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

<i>Name of recipient of loan, including address.</i>	<i>Amount of loan made during the reporting period</i>	<i>Amount of loan repaid during the reporting period</i>	<i>Balance of loan at the end of the reporting period</i>
	\$.	\$.	\$.
	\$.	\$.	\$.
	\$.	\$.	\$.
Enter total amount of loans owed to committee here:	\$ <u> </u> .	\$ <u> </u> .	\$ <u> </u> .

Line item Y1

Line item Y2

Line item Y3

SUMMARY OF INCOME AND EXPENDITURES

Balance of cash and cash equivalents on hand, if any, at the beginning of the reporting period:		\$ 2100 .29	
		Credit	Debit
	Candidate's Personal Contribution to Own Campaign	\$.	
Income:			
	Unitemized Contributions	\$.	
	Itemized Contributions	\$.	
	Contributions from Candidate Committees	\$.	
	Contributions from Organizations	\$.	
	Contributions from Political Parties	\$.	
	Contributions from In-State PACs	\$.	
	Contributions from Out-of-State or Federal PACs	\$.	
	In Kind Contributions	\$.	
	Other Income	\$.	
	Expenditures from an external source to establish a committee	\$.	
Expenditures			
	Operational Expenditures		\$.
	Contributions to Candidates and Committees		\$.
	Debts and Obligations Owed by the Committee		\$.
Loan Activity			
	Monetary loan made to Candidate or Committee during reporting period	\$.	
	Monetary loan made to Candidate or Committee repaid during reporting period		\$.
	Monetary loan made by Committee during reporting period		\$.
	Monetary loan repaid to Committee during the reporting period	\$.	
Amount on hand at the end of the reporting period:		\$ 2100 .29	

***Note: You cannot end the reporting period with a negative balance.**

County, municipal and school candidates file with the person in charge of the local election.